MODRE COUNTY WASH COPY

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information

	tomito apaak	- 21101114410111						1	
1. Committee In	formation					3 1 1			TR No.
a. Fuli Name									c. ID Number
SMITHSON FO	OR MAYOR								
b. Mailing Addre	ess (include Ci	ty, State and Zij	Code)	. ::	\$ 100	/			d. Date Filed
920 N SAYLO SOUTHERN P		387			KOY	03	2011		11/02/2011
POOTIBIOAL	1110, 110 20	507							e. Phone Number
									(910) 692-2571
2. Report Year	3. Period Star	rt Date (mm/dd/	yy)	4. Period	End Da	te (mn	n/dd/yy)		urer Full Name
2011	0	7/15/2011]	10/28/2				SMITHSON
6. Type of Com	nittee (Check (One)	9. Tyr	e of Report	(cl			type of re	port from one category)
Candidate Can			Munic				/County		Referendum
Joint Fundrais		C	X	Organization	nal		rganizatio	nal	Organizational
Referendum	_	gal Expense Fund	. —	Thirty-five		_	uarterly		Pre-referendum
7. Type of Fund		le, check one)	10	Pre-primary	-		First		Final
"Booster Fund	and the second s		回	Pre-election		Ī	Second		Supplemental Final
Building Fund			15	Pre-runoff	}	同	Third		Annual
	lection Year Can	ıdidates Fund		Semi-annual	t I	ī	Fourth		Special
_	mpaign Financing			Mid Ye		_ s	emi-annua	1	-
TO LODIC CAL	~.⊾ள் ப ளமா∭	u- •	H	Year Er		آ جا	Mid Ye		10. Special Report Name
Other:			出	Final		片	Year E	_	Topotan responsibilities
Other:	ng ngayan ngayan kan kan kan kan kan kan kan kan kan k	Diving Market	胎	ranai Special			inal		
8. Number of Fu	unaraisers this	s Keport	14	Phenigi					
	0		1			□ s _i	pecial		
3. Account Info	rmation		Jálský				nformati		
a. Financial Inst		ıme	ggggerich erfe					on Full Na	ime
STATE EMPL									
b. Purpose		c. Account Cod	le		b. Purj	oose			c. Account Code
CAMPAIGN E	YDENICEC				<u>-</u> -			المساحة والموادي والمادة	
CAIVIPAION E	ALEN9E9	1	1		1				
		d. Period Begin	n Balar	ıce					d. Period Begin Balance
		\$		0.00					\$
CERTIFICATION	ON							-	<u> </u>
I certify that t Chapter 163 o	the Committee of the NC Gene	ral Statutes and	l that n	o funds are true and co	commi	ngled and the	with pro at I have	hibited or been trai	e 22A, 22B & 22D-22M of r other non-disclosed ined by the NC State Board
P	rinted Name of S	Signer	-	Sign	ature of	Appoi	nted Trea	surer	Date
FOR OFFICE U	SEONLY		* *	-					
Date Receiv	1	1/3/11	<u>_</u>	Employ	yee: .	N	18		Normal Mail
Date Postm	arked:		_	Employ	yee: _			- <u>[</u>	Registered Mail Hand Delivered
Date Scanne	ed:			Emplo	yee:			_ L	Electronically Filed
Date Data E				Emplo					Signer has not received mandatory training
	assista	cannot be used int treasurer, cu id the Statemen	stodiaı	n of books i	nforma	tion, o	or accour	nt informa	

MUDRE COURS FIRMS CAPY

Detailed Summary Use this form to summarize all disclosure reporting forms ar	nd to total mor	setary information		nendment Yes 🔄 No
	2. Type of Re		3. ID 1	Number
SMITHSON FOR MAYOR	2011 Organi			
Start of Election Cycle: January 1, 2011		Total this Reporting Perio	od .	Total this Election Cycle
4) Cash on Hand at Start		\$ 0.	00 \$	0.00
RECEIPTS				
5) Aggregated Contributions from Individuals	(CRO-1205)	\$ 150.	00 \$	150.00
6) Contributions from Individuals	(CRO-1210)	\$ 2,811.	13 \$	2,811.13
7) Contributions from Political Party Committees	(CRO-1220)	\$ 0.	00 \$	0.00
8) Contributions from Other Political Committees	(CRO-1230)	\$ 0.	00 \$	0.00
9) Loan Proceeds	(CRO-1410)	\$ 0.	00 \$	0.00
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$ 0.	00 \$	0.00
11) Other Receipt Sources				
11a) Interest on Bank Accounts	(CRO-1250)	\$ 0.	34 \$	0.34
11b) Contributions from Not-For-Profit Organizations			00 \$	0.00
11c) Outside Sources of Income	(CRO-1250)	\$ 0.	00 \$	0.00
11d) Legal Expense Fund - Other Sources			00 \$	0.00
11e) Exempt Purchase Price Sales	(CRO-1265)		00 \$	0.00
11e) Exempt Furchase Frice Sales 12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c)	<u> </u>	\$ 2,961.		
EXPENDITURES	,,,,,	2,501.	., 4	
13) Disbursements				
13a) Operating Expenditures	(CRO-1310)	\$ 224.	14 \$	224.14
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$ 0.	00 \$	0.00
13c) Coordinated Party Expenditures	(CRO-1310)	\$ 0.	00 \$	0.00
(4) Aggregated Non-Media Expenditures	(CRO-1315)	\$ 15.		
15) Loan Repayments	(CRO-1420)		00 \$	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$ 590.	-	
17) In-Kind Contributions	(CRO-1510)	\$ 1,936.		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15		\$ 2,765.	- 	
(9) Cash on Hand at End (Add lines 4 and 12 together, then su		\$ 195.		
ADDITIONAL INFORMATION		l		
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$ 0.	00	
21) Outstanding Loans (incl. ones from other campaigns)	(CRO-1430)	\$ 0.	00	
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$ 0.	00	
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$ 0.	00	
24) Account Transfers Within the Committee	(CRO-1720)	\$ 0.	00	
25) Administrative Support	(CRO-1710)	\$ 0.	00 \$	0.00
26) Forgiven Loans	(CRO-1440)	\$ 0.	00 \$	0.00
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$ 0.	00 \$	0.00
28) Contributions to be Refunded	(CRO-1215)	\$ 590.	29 \$	590.29

MOOVE COUNTS LEGIS COSA

Yes No **Aggregated Contributions from Individuals** Page 1 of Optional form used to report NC Contributions From Individuals of \$50 or less 1: Committee Full Name (and Fund if applicable) 2. ID Number SMITHSON FOR MAYOR 3. Contributor Information e. Date (mm/dd/yyyy) f. Amount c. Form of Payment d. In-Kind Description a. Amend b. Account Code Add 1 Check \$ 50.00 10/24/2011 ■ Remove ☐ Add Check 1 \$ 50.00 08/01/2011 Remove ☐ Add Check \$ 1 50.00 08/01/2011 Remove \$150.00 \$ 4. Total only this Page 5. Total of ALL CRO-1205 Pages \$150.00 \$

CRO-1205

(This line must be on line 5 of Detailed Summary Page CRO-1100)

NC State Board of Elections

April 2007

MODE COUNTY PUBLIC COPY

Cont	ributions fro	om Individuals dividual contributions	over \$50 or co	Pg entributions u		•	Yes is not use	X No
		(and Fund if applicable		u		2. I	D Number	
	ISON FOR MAY		<u> </u>		And the second s	. 2.2.		
3 Contr	ributor Informatio	DAT.		Add 🔲 Re	emove			
	lame, Mailing Add			b. Job Title/P		d. C	Comments	
	de city, state, & zi			RETIRED	<u></u>			
		· · · · · · · · · · · · · · · · · · ·		KETHED				
	GARRETT OX 1601			c. Employer's	Name/Specific Field			
	HERN PINES, NO	~ 28388		Educational	Services			
30011	TEKN I HVES, IV	20300		Baacationar	501 11445	e. F	lection Su	m to Date
						\$		200.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	eription	j. Date (mm/dd/yyyy))	k. Amoun	t
	1	Check			09/19/2011		\$	200.00
							\$	
							\$	
3 Cont	ributor Informati	l One	Villa villa 🗖	Add R	emove	ÌÙ.		
The Partie Service Co.	lame, Mailing Add			b. Job Title/P		d. (Comments	
	ide city, state, & zi			RETIRED				
			-,	KLIKED				
	MENSCH NTER COURT			c. Employer's	Name/Specific Field			
	HERN PINES, N	C 28387		SOFTWAR	E			
30011	HEIGH LINES, 14	C 20307		BOT I WILL	_	e. I	Dection Su	m to Date
						\$		100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy))	k. Amour	ıt
	1	Check			10/03/2011		\$	100.00
							\$	
							\$	
3. Cent	ributor Informati	on		Add 🔲 R	emove			
	Name, Mailing Add			b. Job Title/P		d. (Comments	
i .	ide city, state, & z			RETIRED				
FLAIN	IE SILLS							
	EDGELAWN WA	AY WEST		c. Employer's	Name/Specific Field			
SOUTHERN PINES, NC 28387				EDUCATO	R			
					e.]	Dection St	im to Date	
						\$		75.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	scription	j. Date (mm/dd/yyyy))	k. Amour	ıt
	1	Check			10/25/2011		\$	75.00
							\$	
							\$	<u> </u>
4. Tot	al only this Pa	ge				\$		375.00

\$

Contributions from Individuals

CRO-1210

				Amenga	
Pg	2	of	2	Yes	M M

Ise this	form to report in	dividual contributions	over \$50 or co	ntributions un	der \$50 if form CRO 1	205 is no	t used
. Comn	nittee Full Name	(and Fund if applicabl	e)			2. ID Nu	mber
	SON FOR MAY						
on a series in the series				Add 🔲 Rei	move	garingka isa www.saisaisaa	w.s
	ibutor Information ame, Mailing Add			b. Job Title/Pr		d. Comm	
	ame, maining Aud de city, state, & zi				E/EXECUTIVE		
	SMITHSON						
	SAYLOR ST			c. Employer's	Name/Specific Field		•
	ERN PINES, N	C 28387		SMITHSON	OF SOUTHERN	- Electic	n Sum to Date
	92-2571			PINES, INC			
						\$ <i>197</i>	613 4,345.84
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Des	cription	j. Date (mm/dd/yyyy)	k. Ar	nount
	1	In-Kind	FILING FEE, DISK	VOTER LIST	07/15/2011	\$	25.00
	1	In-Kind	DIRECT MAIL PIECE 10/24/201		10/24/2011	\$	1,445.50
	1	In-Kind	OFFICE SUP	PLIES	10/28/2011	\$	465.63
3. Cont	ibutor Informati	on		∝Add □ Re	V-08 (2 V No. 12 M No. 1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
a. Full N	lame, Mailing Ade	dress & Phone		b. Job Title/Pr	ofession	d. Comm	
	de city, state, & z	ip)	min manager and state to the same and the sa	N/A			
	Y SMITHSON			c. Employer's	Name/Specific Field	1	
	OX 1136 HERN PINES, N	C 20200		N/A			
20011	nekn pines, n	C 28308		1,771		e. Election Sum to D	
						\$	500.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind De	scription	j. Date (mm/dd/yyyy) k. A	mount
	1	Check			08/18/2011	\$	500.00
						\$	
						\$	
4. Tot	al only this Pa	ge				\$	2,436.13
5. To	al of ALL CR	O-1210 Pages 6 of Detailed Summary	Page CRO-1100	ľ		\$	2,811.13
CRO-1				oard of Elections	<u></u>		April 200

Committee En	report income not repo	nnlicable)	piraja, kitti y		2.1	D Number	
SMITHSON FO		ритешис)	<u> </u>	<u> </u>		<u></u>	
					<u> </u>		
3. Type of Receip	x Source <i>(Please us</i>	e separate CRO-12	50 forms	for each type of Rece	ipt !	Source.)	<u> </u>
X Interest	Contrib	utions from Not-for-P	rofit Organ	izations 🔲 Outside So	urces	of Income	and the second
4. Contributor In			Add 🔲	Remove			
	iling Address & Phone	 	b. Not-for-	Profit Federal ID#	a. C	omments	
(include city, s							
	YEES CREDIT UNI	ON	c Outside	Source Explanation	┨		
15-501	ama ara 20207		c. Outside	Source 2-p-	1		
SOUTHERN P	NES, NC 28387				e. E	lection Su	n to Date
					S		0.34
					Ľ		
f. Account Code	g. Form of Payment	h. In-Kind Descript	ion	i. Date (mm/dd/y	ууу)	j. Amount	
1	Electric Funds Tran			08/16/2011		\$	0.08
1	Electric Funds Tran			09/20/2011		\$	0.16
4. Contributor I		L *Xanographicagesax ∏ %	Add 🗀	Remove		30 FX 0 150	a Gertabliya
	iling Address & Phone			Profit Federal ID#	d. C	omments	
(include city, s							
	OYEES CREDIT UNI	ON		·			
15-501	31220 01221		c. Outside	Source Explanation	_		
SOUTHERN P	INES, NC 28387					lection Su	m to Date
						Action Su	en a composition
!					\$		0.34
f. Account Code	g. Form of Payment	h. In-Kind Descript	tion	i. Date (mm/dd/y	ууу)	j. Amount	
1	Electric Funds Tran	ata garangan gang gan maya a mana dalah kadi dalah dan maya papa gapan nayang dan adalah dan may		10/17/2011		\$	0.10
<u> </u>						\$	
5. Total only	this Page		William Control		\$		0.34
Burney and the Control of the Contro	LL CRO-1250 Pag	Tes	ar en electrica.		1		
(This line goes i (This line goes i	n line 11a of Detailed Sw n line 11b of Detailed Sw	nmary Page CRO-110 mmary Page CRO-110	0 if Not-for	-Profit Contribution)	\$		0.34
(This line goes i	n line 11c of Detailed Sur	nmary Page CRO-110	0 if Outside	Sources of Income)			

CRO-1250

NC State Board of Elections

Amendme **Disbursements** Pg 1 of 1 Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures 2. ID Number 1. Committee Full Name (and Fund if applicable) SMITHSON FOR MAYOR 3. Type of Disbursement (Please use separate CRO-1310 forms for each type of Disbursement.) Contributions to Candidates/Political Committees ☐ Coordinated Party Expenditures Operating Expenses 4. Payee Information □-Add □ Remove b. Coordinated Committee Name d. Comments a. Full Name, Mailing Address & Phone (include city, state, & zip) **STAPLES** c. Level Registered (Specify) 290 TURNER ST ☐ Federal County: SOUTHERN PINES, NC 28387 Municipality: e. Election Sum to Date ☐ State 236.41 k, Required Remarks f. Account Code g. Form of Payment h. Purpose Code i. Date (mm/dd/yyyy) j. Amount **OFFICE SUPPLIES** Debit Card 09/30/2011 224.14 \$ 224.14 \$ 5. Total only this Page

O* Other * Codes require detailed explanation in required remarks field (k) CRO-1310

A* - Media

E - Salaries

I - Postage

6. Total of ALL CRO-1310 Pages

(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)

7. Purpose Codes (List detailed expenditure code in (h.) above)

B* - Printing

J - Penalties

F* - Equipment

(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm) (This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)

NC State Board of Elections

C* - Fundraising

G - Political Party

K* - Office Expenses

December 2009

D - To Another Candidate

H* - Holding Public Office Expenses

Q* - Donation to Legal Expense Fund

224.14

Aggregated Non-Media Expendit	ture	Expendit	Media	No	gregated	A
-------------------------------	------	----------	-------	----	----------	---

(This line must be on line 14 of Detailed Summary Page CRO-1100)

MOONE	VIMUOD		CS CS
Page 1 of		mendme Yes	No No

\$

Optional form used to report NC Non-Media Expenditures of \$50 or less. [] Committee Shill Name (and Conditionable) SMITHSON FOR MAYOR 3. Payee Information g. Required Remarks a. Amend | b. Account Code | c. Form of Payment | d. Purpose Code | e. Date (mm/dd/yyyy) f. Amount OFFICE SUPPLIES Add Debit Card K 12.27 10/13/2011 \$ ☐ Remove ACCOUNT FEE ☐ Add Electric Funds Tran | O 1 1.00 08/16/2011 \$ Remove ACCOUNT FEE Add Electric Funds Tran 1 1.00 09/20/2011 \$ Remove ACCOUNT FEE Add Electric Funds Tran | O 1 1.00 10/17/2011 \$ Remove 15.27 \$ 4. Total only this Page 5. Total of ALL CRO-1315 Pages

16. Printipos (Coles	That is all the expension	ko code in (ell andas) i secur	
	B* - Printing	C - Figure ing	D - To Another Candidate
E - Salaries	Sirs-Bannonens.	G - Political Party	iale = tambing (bride (Chine (Dagenixes)
Postage 2	J - Penalties	. Tka-Ciber Cremises	Q* - Donations to Legal Expense Fund
O* - Other	<u> </u>		
* Codes require	detailed explanation i	n required remarks field (g	December 2000

CRO-1315

NC State Board of Elections

December 2009

15.27

Refunds/Reimbursements From the Committee Pg 1 of 1 Pyes No
Use this form to report refunds/reimbursements including an additional statements of the committee Pg 1 of 1 Pyes No

1. Committee Full			ements, including conlicable)				Number	
SMITHSON FOR	~		•					l
3. Payèe Informat				Add □ R	emove			
. Full Name, Mail		ress & Phone		d. Type of Com	N 20 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	g. Co	mments	
(include city, sta				Candidate	☐ PAC			
CHRIS SMITHS				☐ Referendum	☐ Party			
920 N SAYLOR				e. Level Regist		h. Or	iginal Recei	pt Date
SOUTHERN PINES, NC 28387			Federal State	County: Municipality:		10/25/20	11	
(910) 692-2571		-				i. Ori	iginal Receip	t Amount
						\$		165.85
b. Job Title/Profess	ion	c. Employer's	Name/Specific Field	f. Purpose Cod	e	j. Ele	ction Sum to	Date
CANDIDATE/EXEC			SOUTHERN PINES,	P		\$	1936,13	1,345.84
k. Account Code	l. Form	of Payment	m. Required Remar	ks	n. Date (mm/dd/y	ууу) (. Amount	
1	ļ	Funds Tran	REIMBURSE FOR STICKERS, BUTTONS		10/25/2011		\$	165.85
3. Payee Informat	ion			Add 🔲 R	emove	V.		
a. Full Name, Mail		ress & Phone		d. Type of Com	mittee	g. Co	mments	
(include city, sta				☐ Candidate	PAC	•		
CHRIS SMITHS	ON			Referendum		_	· · · · · · · · · · · · · · · · · · ·	-t Data
920 N SAYLOR				e. Level Regist Federal	County:	h. Original Receipt Date 10/24/2011		
SOUTHERN PIN	IES, NO	28387		State	Municipality:			11
(910) 692-2571				State	Total or con v	i. Or	iginal Recei	pt Amount
						\$		424.44
		. 731	Name/Specific Field	f. Purpose Cod		T .	ction Sum to	
b. Job Title/Profess		A PARTY OF THE PAR	SOUTHERN PINES,			3	(0 = (17)	~ 245 04
CANDIDATE/EXEC	UIIVE	INC	SOUTHERINES,	P		\$	1936,13	1,345.64
k. Account Code	l. Form	of Payment	m. Required Rema	rks	n. Date (mm/dd/y			
1		Funds Tran	SIGNS		10/27/2011		\$	424.44
4. Total only this	Page					\$		590.29
5. Total of ALL C	RO-132	20 Pages 15 of Detailed S	ummary Page CRO-110	0)		\$		590.29
			rsement code in (f) a					
L - Returned to			Overpayment for Se		N - Exceed	led Co	ontibution Li	mit
P* - Reimburs			Other	ta i akti taksula ili kili ili 1000.	ger ver er er er e n er			
* Codes remir	e detail	ed explanation	in required remark	s field (m)			1 24	

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Amen	dment		

r serv	7 days.	ided to	the con	nmittee or f	und.	_
vith in	7 days.					-
			12: ID P			
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			<u> </u>			Į.
b. Type of Contributor			c. Com	i		
X Individual						
Candidate Party						l
PAC Referendum						
		d. Hection Sum to Date			1/5	
Other Receipt Source		\$	1,936,1	3 7,345.8 4		
	f. Date (mm/dd/yyyy)		l/yyyy)	g. Fair Market Amount		
	07/15/2011		11	\$	25.00	
	10/24/2011		\$	1,445.50		
	10/28/2011		\$	465.63		
	13 (6 - 10) 13 (6 - 10)	" 李特·	\$	<u> </u>	1,936.13]
	Sucite Sucite	nichery Metani Liebani	\$		1,936.13	
	f Cont dual date endum Recei	Remove f Contributor chal date endum Receipt Source f. Date (Remove f Contributor dual date endum Receipt Source f. Date (mm/dc) 07/15/20 10/24/20	Remove	Remove	Remove Contributor C. Comments C. Co

CRO-1510

NC State Board of Elections

December 2007

	MOORE.		والميزالهم	USF T
	Amend	ment		
1	Vec	(. EX ./ ₁₀		

Contributions to be Reimbursed

Contributions to be Kelmbursed	rg .		ΩŢ	
Use this form to report Contributions under \$1,000 which will be	refunde	d with	in 7	days.
Perfunds must be disclosed on the Refunds/Reimbursements Fo				

1. Committee Full Name			2	. ID Numb	er		
SMITHSON FOR MAYOR							
3. Contributor Information		Add 🔲 Ren	nove				
All Name & Mailing Address of the Pavee Full Name &			Mailing Address of the Reimbursee whom the campaign check is written)				
AQUECS INC 916 BYRD AVE NEENAH, WI 54956		CHRIS SMIT 920 N SAYLO	THSON				
a. Contribution Description	b. Date (mm/dd/yyyy)		c. Credit Card Y	/N d. Amo	d. Amount		
SIGNS	10/24/2011		Y	\$	424.44		
3. Contributor Information		Add 🔲 Rep		generalista.			
Full Name & Mailing Address of the Payee (the original vendor)		Full Name & I (the person to	Mailing Address whom the campa	of the Rei ign check	mpursee is written)		
DR. DON'S BUTTONS 3906 W. Morrow Dr. GLENDALE, AZ 85308		CHRIS SMIT 920 N SAYLO	THSON				
a. Contribution Description	b. Date	(mm/dd/yyyy)	c. Credit Card Y	/N d. Am	d. Amount		
BUTTONS, STICKERS	10/25/2011		Υ	\$	165.85		
4: Total only this Page		der de Medica de Medica. Se de Maria de Medica		\$	590.29		
5. Total of ALL CRO-1215a Pages (This line goes in line 28 of Detailed Summary Page	ė CRO-11	00)		\$	590.29		

CRO-1215

NC State Board of Elections

December 2007